

Pride in Parenting
DRUG USE ANSWER SHEET 1

Date Mother Enrolled: _____ Today's Date: _____
month date year month date year

A-1. About how old were you the first time you tried marijuana or hash?

Age when I used marijuana or hash for the first time . . . |__|__|
Never used marijuana or hash in my life 91

A-2. When was the last time you used marijuana or hash?

Within the past week (7 days) 01
Within the past month (30 days) 02
1 or more months ago, but less than 3 months ago 03
3 or more months ago, but less than 6 months ago 04
6 or more months ago, but less than 1 year ago 05
1 or more years ago, but less than 3 years ago 06
3 or more years ago 07
Never used marijuana or hash in my life 91

A-3. About how often, on average, did you use marijuana or hash during this pregnancy?

Daily 01
Almost daily or 3 to 6 days a week 02
1 to 2 days a week 03
Several times a month 04
Monthly or less (but at least once) 05
Did not use marijuana or hash during this pregnancy 91

A-4. During any part of this pregnancy, did you live in the same house with anyone who smoked marijuana or hash?

Yes 01
No 02

A-5. About how old were you the first time you used "crack" cocaine?

Age when I used "crack" cocaine for the first time |__|__|
 Never used "crack" cocaine in my life 91

A-6. When was the last time you used "crack" cocaine?

Within the past week (7 days) 01
 Within the past month (30 days) 02
 1 or more months ago, but less than 3 months ago 03
 3 or more months ago, but less than 6 months ago 04
 6 or more months ago, but less than 1 year ago 05
 1 or more years ago, but less than 3 years ago 06
 3 or more years ago 07
 Never used "crack" cocaine in my life 91

A-7. About how often, on average, did you use "crack" cocaine during this pregnancy?

Daily 01
 Almost daily or 3 to 6 days a week 02
 1 to 2 days a week 03
 Several times a month 04
 Monthly or less (but at least once) 05
 Did not use "crack" cocaine during this pregnancy 91

A-8. Did you use "crack" cocaine within the 24 hours before your labor contractions started?

Yes 01
 No 02

A-9. During this pregnancy, did you ever use "crack" cocaine to cause labor to start?

Yes 01
 No 02

A-10. During any part of this pregnancy, did you live in the same house with anyone who smoked "crack" cocaine?

Yes 01
 No 02

DRUG USE ANSWER SHEET #2

A-11. About how old were you the first time you tried cocaine other than crack?

Age when I tried cocaine other than crack for the first time |__|__|

Never tried other forms of cocaine in my life

91

A-12. When was the last time you used cocaine other than crack?

Within the past week (7 days) 01

Within the past month (30 days) 02

1 or more months ago, but less than 3 months ago 03

3 or more months ago, but less than 6 months ago 04

6 or more months ago, but less than 1 year ago 05

1 or more years ago, but less than 3 years ago 06

3 or more years ago 07

Never tried other forms of cocaine in my life 91

A-13. About how often, on average, did you use cocaine other than "crack" during this pregnancy?

Daily 01

Almost daily or 3 to 6 days a week 02

1 to 2 days a week 03

Several times a month 04

Monthly or less (but at least once) 05

Did not use cocaine other than "crack"
during this pregnancy 91

A-14. Did you use cocaine other than crack within the 24 hours before your labor contractions started?

Yes 01

No 02

A-15. During this pregnancy, did you ever use cocaine other than "crack" to cause labor to start?

Yes 01

No 02

- A-16. About how old were you the first time you used heroin?
- Age when I used heroin for the first time |__|__|
 Never used heroin in my life 91
- A-17. When was the last time you used heroin?
- Within the past week (7 days) 01
 Within the past month (30 days) 02
 1 or more months ago, but less than 3 months ago 03
 3 or more months ago, but less than 6 months ago 04
 6 or more months ago, but less than 1 year ago 05
 1 or more years ago, but less than 3 years ago 06
 3 or more years ago 07
 Never tried heroin in my life 91
- A-18. About how often, on average, did you use heroin during this pregnancy?
- Daily 01
 Almost daily or 3 to 6 days a week 02
 1 to 2 days a week 03
 Several times a month 04
 Monthly or less (but at least once) 05
 Did not use heroin during this pregnancy 91
- A-19. Did you ever smoke heroin during this pregnancy?
- Yes 01
 No 02
- A-20. During this pregnancy, which of these other drugs, if any, did you use?
 (CIRCLE ALL THAT APPLY)
- Inhalants (Glue, Amyl Nitrite, Poppers, Aerosol Sprays) 01
 Hallucinogens (LSD, PCP, Peyote, Mescaline, Ecstasy) 02
 Methadone obtained as part of a treatment program 03
 Methadone obtained from another source 04
 Smokable methamphetamine (Ice) 05
 Did not use any of these drugs during this pregnancy 91

DRUG USE ANSWER SHEET #3

A-21. About how old were you the first time you took a stimulant for nonmedical reasons?

Age when I first used a stimulant
for a non-medical reason |__|__|
Never used a stimulant for a non-medical
reason in my life 91

A-22. When was the last time you took any stimulant for nonmedical reasons?

Within the past week (7 days) 01
Within the past month (30 days) 02
1 or more months ago, but less than 3 months ago 03
3 or more months ago, but less than 6 months ago 04
6 or more months ago, but less than 1 year ago 05
1 or more years ago, but less than 3 years ago 06
3 or more years ago 07
Never used a stimulant for a non-medical
reason in my life 91

A-23. Did you take any stimulant for nonmedical reasons during this pregnancy?

Yes 01
No 02

A-24. About how old were you the first time you took a sedative, tranquilizer, or analgesic for nonmedical reasons?

Age when I first used a sedative, tranquilizer, or
analgesic for a nonmedical reason |__|__|
Never used a sedative, tranquilizer, or analgesic
for a nonmedical reason in your life 91

A-25. When was the last time you took a sedative, tranquilizer, or analgesic for nonmedical reasons?

Within the past week (7 days) 01
Within the past month (30 days) 02
1 or more months ago, but less than 3 months ago 03
3 or more months ago, but less than 6 months ago 04
6 or more months ago, but less than 1 year ago 05
1 or more years ago, but less than 3 years ago 06
3 or more years ago 07
Never used a sedative, tranquilizer, or analgesic
for a non-medical reason in my life 91

A-26. Did you take a sedative, tranquilizer, or analgesic for nonmedical reasons during this pregnancy?

Yes 01
No 02

DRUG USE ANSWER SHEET #4

- B-1. During this pregnancy, which of these drugs, if any, did you use at the same time or within a couple of hours of when you drank beer, wine, or liquor?
(CIRCLE ALL THAT APPLY)

Cigarettes	01
Alcohol (Beer, Wine, Hard Liquor)	02
Marijuana (Reefer, Hash, THC)	03
Inhalants (Glue, Amyl Nitrite, Poppers, Aerosol Sprays)	04
Crack Cocaine	05
Other Cocaine	06
Hallucinogens (LSD, PCP, Peyote, Mescaline, Ecstasy)	07
Heroin	08
Smokable Methamphetamine (Ice)	09
Other Stimulants (Amphetamines, Forms of Methamphetamine other than Ice, Preludin, Uppers, Speed)	10
Sedatives (Barbiturates, Sleeping Pills, Seconal, Downers)	11
Tranquilizers (Librium, Valium, Benzodiazepine)	12
Analgesics (Darvon, Demerol, Talwin, Talacen)	13
Other (SPECIFY): _____	14
Methadone obtained as part of a treatment program	15
Methadone obtained from another source	16
Did not use drugs with alcohol during this pregnancy	91

- B-2. Have you ever used a needle to get any drug injected under your skin, into a muscle, or into a vein for nonmedical reasons?

Yes	01
No	02

B-3. When was the last time you took any drug with a needle for nonmedical reasons?

Within the past week (7 days) 01
 Within the past month (30 clays) 02
 1 or more months ago, but less than 3 months ago 03
 3 or more months ago, but less than 6 months ago 04
 6 or more months ago, but less than 1 year ago 05
 1 or more years ago, but less than 3 years ago 06
 3 or more years ago 07
 Never used a needle for a non-medical reason
 in my life 91

B-4. Did you take any drug with a needle for nonmedical reasons during this pregnancy?

Yes 01
 No 02

B-5. How much do you think women risk harming the fetus or themselves physically or in other ways for each of the following activities? (CIRCLE ONE NUMBER ON EACH LINE).

		No Risk	Slight Risk	Moderate Risk	Great Risk
B-5a.	Smoking marijuana during pregnancy	01	02	03	04
B-5b.	Using "Crack" during pregnancy	01	02	03	04
B-5c.	Using other cocaine during pregnancy	01	02	03	04
B-5d.	Drinking regularly during pregnancy	01	02	03	04
B-5e.	Smoking cigarettes during pregnancy	01	02	03	04

DRUG USE ANSWER SHEET #5

C-1. How many times in your life have you been treated for problems related to your alcohol or drug use?

Number of times you have been treated for
alcohol or drug problems |__|__|
Never treated for alcohol or drug problems in my life 91

C-2. Think of the last time you received treatment or counseling. Was this treatment or counseling for alcohol problems or drug problems?

Alcohol problems 01
Drug problems 02
Both 03
Never treated for alcohol or drug problems in my life 91

C-3. Did you ever apply or ask for treatment or counseling for drug or alcohol problems during this pregnancy?

Yes 01
No 02

C-4. Did you receive treatment or counseling (related to your alcohol/drug use) during this pregnancy?

Yes 01
No 02